ORGANIZATION

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STATEMENT OF **FEC** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Centrus Energy Corp. PAC 6901 Rockledge Drive, Suite 800 ADDRESS (number and street) (Check if address is changed) Bethesda 20817 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS vargasc@centrusenergy.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 29 2016 C00355719 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Steve Greene Type or Print Name of Treasurer Steve Greene [Electronically Filed] 05 05 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

| FEC Form 1 (Revised 02/2009) | Page 2 |
|--|---|
| TYPE OF COMMITTEE | |
| Candidate Committee: (a) This committee is a principal campaign committee. (Complete the candidate Complete the candidate Complete the candidate Committee) | date information below) |
| (b) This committee is an authorized committee, and is NOT a principal cam | |
| information below.) Name of | |
| Candidate | |
| Candidate Party Affiliation Office Sought: House Senate | State President District |
| (c) This committee supports/opposes only one candidate, and is NOT an au | uthorized committee. |
| Name of Candidate | |
| Party Committee: | |
| (d) This committee is a (National, State or subordinate) committee of the | (Democratic, e Republican, etc.) Party |
| Political Action Committee (PAC): | |
| (e) X This committee is a separate segregated fund. (Identify connected organi | ization on line 6.) Its connected organization is |
| Corporation Corporation w/o Capit | tal Stock Labor Organization |
| Membership Organization Trade Association | Cooperative |
| In addition, this committee is a Lobbyist/Registrant PAC. | |
| (f) This committee supports/opposes more than one Federal candidate, and committee. (i.e., nonconnected committee) | d is NOT a separate segregated fund or part |
| In addition, this committee is a Lobbyist/Registrant PAC. | |
| In addition, this committee is a Leadership PAC. (Identify sponsor of | on line 6.) |
| Joint Fundraising Representative: | |
| (g) This committee collects contributions, pays fundraising expenses and disbucommittees/organizations, at least one of which is an authorized committee | |
| (h) This committee collects contributions, pays fundraising expenses and disbu committees/organizations, none of which is an authorized committee of a fe | rses net proceeds for two or more political |
| Committees Participating in Joint Fundraiser | |
| · | ID number C |
| 2. FEC | ID number C |
| 3. FEC | ID number C |
| 4. | ID number C |

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| Write or Type Committee Name | | |
| Centrus Energy C | Corp. PAC | |
| 6. Name of Any Connected Orga | nization, Affiliated Committee, Joint Fundraising Representative, or L | eadership PAC Sponsor |
| Centrus Energy Corp. | | |
| | | |
| | 01 Rockledge Drive, Suite 800 | |
| Mailing Address | | |
| L | ethesda MD 2 | 0817 |
| | allesua | |
| | CITY STATE | ZIP CODE |
| Relationship: X Connected Or | ganization Affiliated Committee Joint Fundraising Representative | Leadership PAC Sponsor |
| Custodian of Records: Identify books and records. | by name, address (phone number optional) and position of the persor | 1 in possession of committee |
| James Howe | | |
| | 901 Rockledge Drive, Suite 800 | |
| Mailing Address | | |
| | | 00047 |
| L | ethesda MD 2 | 20817 |
| Title or Position | CITY STATE | ZIP CODE |
| PAC Chairman | Telephone number 202 | 515 4928 |
| Treasurer: List the name and ac any designated agent (e.g., assis | Idress (phone number optional) of the treasurer of the committee; and stant treasurer). | the name and address of |
| Full Name Steve Greene | | 1 |
| of Treasurer | 04 De Wester Dive 90 its 900 | |
| Mailing Address | 01 Rockledge Drive, Suite 800 | |
| L | | |
| В | ethesda | 0817 |
| Title or Position | CITY STATE | ZIP CODE |
| Treasurer | Telephone number 301 | _ 564 _ 3356 |

| | n 1 (Revised 02/2009) | |
|---|---|----------------|
| | | |
| Full Name of Designated Agent | Kenneth Gross | |
| Mailing Address | 1440 New York Avenue, NW | |
| | Washington DC 20005 | |
| Title or Position Asst. Treasurer | | CODE 7007 |
| Banks or Other safety deposit box Name of Bank, D | Depositories: List all banks or other depositories in which the committee deposits funds, holds access or maintains funds. Depository, etc. | ccounts, rents |
| safety deposit box | Depository, etc. | ccounts, rents |
| safety deposit box | Depository, etc. Wells Fargo | ccounts, rents |
| safety deposit box | Depository, etc. | ccounts, rents |
| safety deposit box Name of Bank, D | Depository, etc. Wells Fargo Westlake Crossing Branch | ccounts, rents |
| safety deposit box Name of Bank, D | Wells Fargo Westlake Crossing Branch 1305 Westlake Drive Bethesda MD 20817 | ccounts, rents |
| safety deposit box Name of Bank, D | Wells Fargo Westlake Crossing Branch 1305 Westlake Drive Bethesda CITY STATE ZIF | |
| safety deposit box Name of Bank, D Mailing Address | Wells Fargo Westlake Crossing Branch 1305 Westlake Drive Bethesda CITY STATE ZIF | |
| safety deposit box Name of Bank, D Mailing Address Name of Bank, D | Wells Fargo Westlake Crossing Branch 1305 Westlake Drive Bethesda CITY STATE ZIF | |
| safety deposit box Name of Bank, D Mailing Address | Wells Fargo Westlake Crossing Branch 1305 Westlake Drive Bethesda CITY STATE ZIF | |
| safety deposit box Name of Bank, D Mailing Address Name of Bank, D | Wells Fargo Westlake Crossing Branch 1305 Westlake Drive Bethesda CITY STATE ZIF | |